

Nevada State Health Division

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: NVS7197AGZ	(X2) MULTIPLE CONSTRUCTION A. BUILDING: _____ B. WING: _____	(X3) DATE SURVEY COMPLETED 02/22/2013
NAME OF PROVIDER OR SUPPLIER AMEERY CARE II		STREET ADDRESS, CITY, STATE, ZIP CODE 271 EAST DESERT ROSE DRIVE HENDERSON, NV 89015		
(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
Y 000	<p>Initial Comments</p> <p>The findings and conclusions of any investigation by the Health Division shall not be construed as prohibiting any criminal or civil investigations, actions or other claims for relief that may be available to any party under applicable federal, state, or local laws.</p> <p>This Statement of Deficiencies was generated as a result of an annual State Licensure survey conducted in your facility on 2/22/13. This State Licensure survey was conducted by the authority of NRS 449.150, Powers of the Health Division.</p> <p>The facility is licensed for 10 Residential Facility for Group beds which provide care to persons with Alzheimer's disease, Category II residents. The census at the time of the survey was nine. Nine resident files were reviewed and four employee files were reviewed.</p> <p>The facility received a grade of D.</p> <p>The following deficiencies were identified:</p>	Y 000		
Y 026 SS=D	<p>449.190(3) Contents of License-Multiple Types</p> <p>NAC 449.190 License: Contents; validity; transferability; issuance of more than one type.</p> <p>3. A residential facility may be licensed as more than one type of residential facility if the facility provides evidence satisfactory to the bureau that it complies with the requirements for each type of facility and can demonstrate that the residents will be protected and receive necessary care and</p>	Y 026		

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TITLE

(X6) DATE

LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

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Y 026	Continued From page 1 services. This Regulation is not met as evidenced by: Based on record review and interview on 2/22/13, 1 of 9 persons the facility was caring for had a history of mental illness without an endorsement to care for such a person (Resident #2-had a psychiatric diagnosis not indicating a diagnosis of Alzheimer's disease). Severity: 2 Scope: 1	Y 026		
Y 088 SS=C	4493199(4) Staffing Schedule NAC 449.199 Staffing requirements; limitations on number of residents; written schedule required for each shift. 4. The administrator of a residential facility shall maintain monthly a written schedule that includes the number and type of members of the staff of the facility assigned for each shift. The schedule must be amended if any changes are made to the schedule. The schedule must be retained for at least 6 months after the schedule expires. This Regulation is not met as evidenced by: Based on record review and interview on 2/22/13, the administrator failed to maintain a monthly staffing schedule that was posted. Severity: 1 Scope: 3	Y 088		

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Y 103 SS=E	<p>449.200(1)(d) Personnel File - NAC 441A / Tuberculosis</p> <p>NAC 449.200 Staffing requirements; limitations on number of residents; written schedule required for each shift.</p> <p>1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include: (d) The health certificates required pursuant to chapter 441A of NAC for the employee.</p> <p>This Regulation is not met as evidenced by: Based on record review and interview on 2/22/13, the facility failed to ensure 2 of 4 employees complied with NAC 441A.375 regarding pre-employment physical examinations(Employee #3 and #4-physicals older than 6 months at time of hire).</p> <p>Severity: 2 Scope: 2</p>	Y 103		
Y 105 SS=C	<p>449.200(1)(f) Personnel File - Background Check</p> <p>NAC 449.200 Staffing requirements; limitations on number of residents; written schedule required for each shift.</p> <p>1. Except as otherwise provided in subsection 2, a separate personnel file must be kept for each member of the staff of a facility and must include:</p>	Y 105		

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Y 105	Continued From page 3 (f) Evidence of compliance with NRS 449.176 to 449.185, inclusive. This Regulation is not met as evidenced by: Based on record review and interview on 2/22/13, the facility failed to ensure 4 of 4 employees met background check requirements of NRS 449. (Employee #1, #2, #3 and #4-not fingerprinted under correct facility account). Severity: 1 Scope: 3	Y 105			
Y 106 SS=E	449.200(2)(a) Personnel File - 1st aid & CPR NAC 449.200 Staffing requirements; limitations on number of residents; written schedule required for each shift. 2. The personnel file for a caregiver of a residential facility must include, in addition to the information required pursuant to subsection 1, (a) A certificate stating that the caregiver is currently certified to perform first aid and cardiopulmonary resuscitation. This Regulation is not met as evidenced by: Based on record review and interview on 2/22/13, the facility failed to ensure that 1 of 4 caregivers were trained in first aid and cardiopulmonary resuscitation (Employee #2-expired certificate in	Y 106			

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Y 106	Continued From page 4 April 2012. Non-approved Online CPR/FA course taken). Severity: 2 Scope: 2	Y 106		
Y 250 SS=F	449.217(1) Kitchens-Equipment works; Clean and Sanitary NAC 449.217 Kitchens; storage of food; adequate supplies of food; permits; inspections. 1. The equipment in a kitchen of a residential facility and the size of the kitchen must be adequate for the number of residents in the facility. The kitchen and the equipment must be clean and must allow for the sanitary preparation of food. The equipment must be in good working condition. This Regulation is not met as evidenced by: Based on observation and interview on 2/22/13, the facility did not ensure the dishwashing machine was in good working condition and the oven needed to be cleaned. Severity: 2 Scope: 3	Y 250		
Y 272 SS=C	449.2175(3) Service of Food - Menus	Y 272		

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Y 272	Continued From page 5 NAC 449.2175 Service of food; seating; menus; special diets; nutritional requirements; dietary consultants. 3. Menus must be in writing, planned a week in advance, dated, posted and kept on file for 90 days. This Regulation is not met as evidenced by: Based on observation, record review and interview on 2/22/13, the facility failed to ensure a current planned and dated menu was posted. Severity: 1 Scope: 3	Y 272		
Y 356 SS=F	449.222(6) Bathrooms and Toilet Facilities NAC 449.222 Bathrooms and toilet facilities; toilet articles. 6. Bathroom doors that are equipped with locks must open with a single motion from the inside without the use of a key. If a key is required to open a lock from outside the bathroom, the key must be readily available at all times. This Regulation is not met as evidenced by: Based on observation on 2/22/13, the facility did not ensure the locks on 2 resident bathroom doors and a door leading from the kitchen to resident bedrooms could be opened with a single motion. Severity: 2 Scope: 3	Y 356		

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Y 431	Continued From page 6	Y 431		
Y 431	449.229(2) State Fire Marshall referral NAC 449.229 Requirements and precautions regarding safety from fire. 2. The Bureau shall notify the State Fire Marshal or the appropriate local government, as applicable, if, during an inspection of a residential facility, the Bureau knows of or suspects the presence of a violation of a regulation of the State Fire Marshal or a local ordinance relating to safety from fire. This Regulation is not met as evidenced by: Based on observation and interview on 2/22/13, the facility failed to ensure 2 of 3 emergency lights were working properly (lights would not illuminate when tested). State Fire Marshall referral.	Y 431		
Y 529 SS=C	449.260(1)(d) Activities for Residents NAC 449.260 Activities for residents. 1. The caregivers employed by a residential facility shall: (d) Provide each resident with a written program of activities.	Y 529		

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Y 529	Continued From page 7 This Regulation is not met as evidenced by: Based on record review and interview on 2/22/13, the facility failed to ensure a current activity calendar was posted. Severity: 1 Scope: 3	Y 529		
Y 876 SS=B	449.2742(4) Medication Administration NRS 449.037 NAC 449.2742 Administration of medication: Responsibilities of administrator, caregivers and employees of facility. 4. Except as otherwise provided in this subsection, a caregiver shall assist in the administration of medication to a resident if the resident needs the caregiver's assistance. A caregiver may assist the ultimate user of controlled substances or dangerous drugs only if the conditions prescribed in subsection 6 of NRS 449.037 are met. This Regulation is not met as evidenced by: Based on record review and interview on 2/22/13, the facility failed to ensure an ultimate user agreement was obtained for 2 of 9 residents (Resident #3 and #6). Severity: 1 Scope: 2	Y 876		

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Y 936	Continued From page 8	Y 936			
Y 936 SS=D	<p>449.2749(1)(e) Resident file-NRS 441A Tuberculosis</p> <p>NAC 449.2749 Maintenance and contents of separate file for each resident; confidentiality of information.</p> <p>1. A separate file must be maintained for each resident of a residential facility and retained for at least 5 years after he permanently leaves the facility. The file must be kept locked in a place that is resistant to fire and is protected against unauthorized use. The file must contain all records, letters, assessments, medical information and any other information related to the resident, including without limitation: (e) Evidence of compliance with the provisions of chapter 441A of NRS and the regulations adopted pursuant thereto.</p> <p>This Regulation is not met as evidenced by: Based on record review on 2/22/13, the facility failed to ensure 2 of 9 residents complied with NAC 441A.380 regarding tuberculosis testing (Resident #8- missing two step TB skin test and Resident #9- missing proof of positive TB skin test).</p> <p>Severity: 2 Scope: 1</p>	Y 936			
Y 991 SS=F	<p>449.2756(1)(b) Alzheimer's Fac door alarm</p> <p>NAC 449.2756</p>	Y 991			

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Y 994	Continued From page 10 This Regulation is not met as evidenced by: Based on observation on 2/22/13, the facility failed to ensure dangerous items were not accessible to 9 of 9 residents (kitchen knife drawer was unlocked with the key in the lock). Severity: 2 Scope: 3	Y 994		
Y9999	Final Observations Based on interview and record review on 2/22/13, the facility failed to ensure 1 of 4 employees received training to recognize and prevent the abuse of older persons before working in the facility (Employee #3).	Y9999		

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